The brang

ASHBURTON URBAN DISTRICT COUNCIL

ANNUAL REPORT 1953

Mr Chairman and Councillors,

I beg to submit my Annual Report for the year 1953.

The general state of health in Ashburton is very satisfactory, and apart from one small outbreak of whooping cough at the latter end of the year, there has been no serious illness.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area of District (in acrea)		6,781
Population - Mid 1953		2,680
Population in 1952 Census		2 , 695
Number of inhabited houses		1,020
Rateable value on 1st. April, 1953	£.	15,571
Ratebale value on 31st December, 1953	£.	15,679
Product of penny rate (as at 1st. April, 1952)	£.	59
VTTAT, STATTSTTCS.		

VITAL STATISTICS.

In the statistics which follow it will be noted that the Birth and Death rates are calculated as 'Crude' and 'Corrected'.

The 'Crude' rate represents the actual figures obtained by arithmetical proportion.

The 'Corrected' or 'Standardised' rate takes into account the difference in the distribution of the various age groups and the proportion of the sexes in Ashburton as compared with the rest of the country and gives a truer comparison between the state of affairs in this Urban District and that in the larger units.



BIRTHS.

Live Births.	Male.	Female.	Total.
Legitimate Illegitimate	15 -= _15_	24 - - _2 <u>4</u> _	39 _
Crude Live Birth rate per Corrected Live Birth rate	per 1000 to		- 14.55 15.86
Crude Live Birth rate for	the Adminis	trative Devon.	13.4
Corrected Live Birth rate	County of	Devon.	14.74
Live Birth rate per 1000 t	otal popula and Wales		15.5
Still Births.			
Still Birth rate per		live and still	
Still Birth rate per		live and stil	
Deaths.			
During the year the a was found to be 66.55 year deaths was 66.85 and for f	s, The av	erage age of	all male
<u>Male</u>	Female		Total
20	19		39
Crude death rate per 1000 Corrected death rate per 1 Crude death rate for the A	000 populat Administrati	ion	11.50
Corrected death rate for t	the Administ	rative	10 77

Infant Mortality.

(Death of Infants under One year of Age)......NIL.

Death Rate per 1000 total population
England & Wales..... 11.4

County of Devon..... 10.77



Neo-Natal Mortality.

(Death of Ir	nfants under 1	Four weeks of	age) NIL.
Neo-natal n	nortality for	the Administ	rative
		County of	Devon17.92
Neo-natal n	mortality for		Wales17.70

Maternal Mortality.

No maternal deaths occurred during the past year. A total of six cases occurred in the Administrative County of Devon, representing a rate of 0.88 per thousand.

AGE AT DEATH.

			Male.	Female.
Infants Infants			-	+
	1 .	-	⊷	-
	5 .	-	⊷-	4
	15 .		⊷-	
	25 •	-	2	2
	45	-	4	2
	65 .		8	8
		dover	6_	6_
			20	19

Total: - 39

CAUSES OF DEATH.

	Male.	Female.
All causes	20	19
Tuberculosis (Respiratory)		1
Malignant neoplasm stomach	1	•••
Malignant neoplasm breast Other malignant and lymphat	ic -	1
neoplasms	2	3
Diabetes	-	1
Vascular lesions of nervous		
system	1	5
Coronary disease, angina Hypertension with heart	3	1
disease	3	1
Other heart disease	2	2
Other circulatory disease	3 2 3 3	1
Bronchitis	3	1
Nephritis and nephrosis	1	
Hyperplasis of Prostate Other defined and ill-	1	
defined diseases	-	2
	2 g g g g	to part and bed and
	20	19_



INFECTIOUS DISEASES

No cases of infectious disease were notified during the year.

WATER SUPPLY.

During the year, five samples of the main town water supply were taken and submitted for bacteriological examination. All samples fell into the Ministry Grade 1, with the exception of a single sample which fell into Grade 1V - this instance was quickly rectified.

Samples taken from various other sources gave varying results.

SEWAGE.

The problem of sewage disposal in Ashburton is still in the melting pot, but there emerge two possible solutions. Firstly, an amalgamation with Buckfastleigh, or alternatively an improvement of the existing method of land irrigation. The final decision rests largely on the directions of the Ministry.

HOUSING

No new Council houses were completed in the past year. Seven private houses were built and plans have been approved for several more.

There are many old properties in a neglected state which are not really fit for human habitation, and action will need to be taken in the near future to ensure either their demolition or extensive repair.

DR. R. BELLAMY.

Medical Officer of Health.

